## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number
69579357

| CLAIMS AS FILED - PART I  |  |   |             |   |                     |        | L ENTITY               |    | OTHER               | THAN                   |
|---|--|---|-------------|---|---------------------|--------|------------------------|----|---------------------|------------------------|
|   |  |   | (Column 1)  |   | (Column 2)          |        |                        | OR | SMALL               | ENTITY                 |
| FC  | )R<br>   | NUMBE                                     | R FILED     | NUMBER                                      | EXTRA               | RATE   | FEE                    | ]  | RATE                | FEE                    |
| ВА  | SIC FEE  |   |             |   |                     |        | 345.00                 | ОЯ |                     | 690.00                 |
| TO  | TAL CLAIMS                                     | g   | minus 2     |   |                     | X\$ 9  | =                      | OR | X\$18=              | 162                    |
|   | EPENDENT CL                                    |   | ) minus     | 3= 2  | t                   | X39=   | =                      | OR | X78=                | 136"                   |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |             |   |                     |        | =                      | OR | +260=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |             |   |                     |        | L                      | OR | TOTAL               | 1008°                  |
| CLAIMS AS AMENDED - PART II   |  |   |             |   |                     |        |                        |    | OTHER THAN          |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |             |   |                     | SMAL   | L ENTITY               | OR | SMALL               | ENTITY                 |
| AMENDMENT A   | A  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | NUMBER<br>PREVIOUSLY<br>PAID FOR            | PRESENT<br>EXTRA    | RATE   | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 29                                      | Minus       | 29  | =                   | X\$ 9= | =                      | OR | X\$18=              |                        |
| AME   | Independent                                    | · S                                       | Minus       | *** 5                                       | =                   | X39=   |                        | OR | X78=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |             |   |                     |        | = [                    | OR | +260=               |                        |
|   |  |   |             |   |                     |        | AL .                   | OR | TOTAL<br>ADDIT. FEE |                        |
| ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE   |  |   |             |   |                     |        |                        |    |                     |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA    | RATE   | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus       | **  | 3                   | X\$ 9= |                        | OR | X\$18=              |                        |
| ME  | Independent                                    | •   | Minus       | ***   | =                   | X39=   |                        | OR | X78=                |                        |
| ⋖   | FIRST PRESE                                    | NTATION OF M                              | ULTIPLE DEP | ENDENT CLAIM                                |                     |        |                        | On |                     |                        |
|   |  |   |             |   |                     | +130=  |                        | OR | +260=               |                        |
|   |  | TOT.<br>ADDIT. FE                         |             | OR  | TOTAL<br>ADDIT, FEE |        |                        |    |                     |                        |
|   |  | (Column 1)                                |             | (Column 2)                                  | (Column 3)          | ·<br>· |                        |    |                     | ·                      |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA    | RATE   | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus       | ••  | =                   | X\$ 9= |                        | OR | X\$18=              |                        |
|   | Independent                                    | •   | Minus       | ***   | =                   | X39=   | 1                      | OR | X78=                |                        |
| Ĺ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |             |   |                     |        |                        |    |                     |                        |
|   | If the entry in colu                           | +130=                                     |             | OR  | +260=<br>TOTAL      |        |                        |    |                     |                        |
| "If the entry in column 1 is less than the entry in column 2, write 0 in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE OR ADDIT. FEE |  |   |             |   |                     |        |                        |    |                     |                        |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.   |  |   |             |   |                     |        |                        |    |                     |                        |